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Bib Data Sheet

CONFIRMATION NO. 9783

|   |   |                                       |   |                                       |
|---|---|---------------------------------------|---|---------------------------------------|
| <b>SERIAL NUMBER</b><br>09/825,534  | <b>FILING DATE</b><br>04/02/2001<br><b>RULE</b>   | <b>CLASS</b><br><del>707</del><br>706 | <b>GROUP ART UNIT</b><br><del>2178</del><br>21  | <b>ATTORNEY DOCKET NO.</b><br>IVQ-001 |
| <b>APPLICANTS</b><br>Saul Shiffman, Pittsburgh, PA;<br>Michael R. Hufford, Pittsburgh, PA;<br>Jean A. Paty, Pittsburgh, PA;   |   |                                       |   |                                       |
| <b>** CONTINUING DATA *****</b> <i>cid none</i>   |   |                                       |   |                                       |
| <b>** FOREIGN APPLICATIONS *****</b> <i>cid none</i>  |   |                                       |   |                                       |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **</b><br><b>** 05/30/2001</b>   |   |                                       |   |                                       |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>cid</i> |   | <b>STATE OR COUNTRY</b><br>PA         | <b>SHEETS DRAWING</b><br>2  | <b>TOTAL CLAIMS</b><br>37             |
| Verified and Acknowledged<br>Examiner's Signature _____ Initials _____  |   | <b>INDEPENDENT CLAIMS</b><br>10       |   |                                       |
| <b>ADDRESS</b><br>000959  |   |                                       |   |                                       |
| <b>TITLE</b><br>Apparatus and method for prediction and management of subject compliance in clinical research   |   |                                       |   |                                       |
| <b>FILING FEE RECEIVED</b><br>853   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                       | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                       |